

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	ELIZA		04-16-01
O.I.P.E. CLASSIFIER			5-5-01
FORMALITY REVIEW	AT	1071	06/04/01
RESPONSE FORMALITY REVIEW	TA	1113	11-01-01

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final Original	9/22/01
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20	✓
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23	✓
24	✓
25	✓
26	✓
27	✓
28	✓
29	✓
30	✓
31	✓
32	✓
33	✓
34	✓
35	✓
36	✓
37	✓
38	✓
39	✓
40	✓
41	✓
42	✓
43	✓
44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
Final Original	9/22/01
51	✓
52	✓
53	✓
54	✓
55	✓
56	✓
57	✓
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59	✓
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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50-571  
11/01/01